


Substitute for form 1449/PTO (Revised 04/2003) INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known		
				Application Number	To Be Assigned	
				Filing Date	Concurrently Herewith	
				First Named Inventor	Keith Rea	
				Group Art Unit		
				Examiner Name		
Sheet	1	of	1	Attorney Docket Number 031599/259285		
U. S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.	Document Number Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear	
PB	1	US-221,137	10-28-1879	Wright		
PB	2	US-544,398	08-13-1895	Ackerman		
PB	3	US-2,080,210	05-11-1937	Mafra		
PB	4	US-Des. 120,759	05-28-1940	O/Bryon		
PB	5	US-2,259,504	10-21-1941	Wilson, et al.		
PB	6	US-2,569,179	09-25-1951	Lanchart		
PB	7	US-3,132,768	05-12-1964	Orr		
PB	8	US-3,603,358	09-07-1971	Mallindine		
PB	9	US-4,283,951	08-18-1981	Varpio		
PB	10	US-5,662,249	09-02-1997	Grosse		
PB	11	US-6,470,745 B1	10-29-2002	Reay, et al.		
FOREIGN PATENT DOCUMENTS						
Examiner Initials	Cite No.	Foreign Patent Document Country Code - Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translation Attached
Examiner Signature				Date Considered	2/28/05	

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

DISCLOSURE

(Use as many sheets as necessary)

1

of

2

Attorney Docket Number	031599/259285
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Application Number	10/625,313
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Filing Date	July 22, 2003
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First Named Inventor	Rea
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Group Art Unit	3727
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Examiner Name

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Patryk

Date
Considered

2/28/05

***Examiner:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Substitute for form 1449-PTG
(Revised 04/2003)

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet	2	of	2
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Complete if Known

Application Number	10/625,313
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Examiner Name _____

Attorney Docket Number	031599/259285
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OTHER DOCUMENTS

[illegible]

**Examiner
Signature**

Porth By

Date _____

Considered

2/28/05

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